## U.S.-[FOREIGN SITE] Research Experience for Undergraduates (REU) Department of ABC XYZ University

## **Sample Reference Request Form**

## POSTMARK DEADLINE FOR SUBMISSION: MM/DD/YYYY

| Applicant Name  |
|---|
| The Family Educational Rights and Privacy Act (FERPA; 34 C.F.R. Part 99) provides rights and protections regarding the disclosure of records held by educational institutions. These rights and protections apply to documents, files and materials in whatever medium, which contain information related directly to a student and from which a student can be individually identified. By signing the waiver statement below, I waive my right to inspect under FERPA the reference letter solicited herewith. This waiver applies to all future holders of the solicited letter. |
| ☐ <b>I waive</b> my right of access to this reference letter.   |
| (Applicant signature and date)  |
| <u>OR</u>   |
| ☐ <b>I do not waive</b> my right of access to this reference letter. (If waiver statement is unsigned, the student is specifically reserved the right of access to this reference letter.)  |
| (Applicant signature and date)  |
| Recommender Instructions:  1. Please read and complete this reference request form, supplying the information requested below. If you wish to use your own institutional stationery, please   |
| attach this completed form to your letter.  |
| 2. Please sign and date the reference report where indicated.   |
| 3. Please transmit completed form, together with your reference report:  OR. FAX TO:  |
| - ,   |
| U.S[FOREIGN SITE] REU Program (###) ###-###  Department of ABC OR, E-MAIL TO:   |
| XYZ University abc@xyz-univ.edu   |
| City, State ZIP   |

4. The postmark deadline for submission of all materials is November 30, 200X.

[For U.S.-[FOREIGN SITE] REU program information, consult the Web site at: http://...]

## **Reference Report**

| Recommender's Name | <br>  |
|--------------------|-------|
| Department         | <br>  |
| Institution        |       |
| Address            |       |
|                    |       |
| Telephone          | _     |
| Fax                | <br>_ |
| E-mail             | <br>_ |
|                    |       |
|                    |       |

How long, and in what capacity, have you known the applicant?

In specific terms, explain how participation in the U.S-[FOREIGN SITE] REU Program will benefit the applicant in pursuit of his/her academic and professional careers. What unique approaches, opportunities, or skills will the applicant obtain through program participation?

| Describe the applicant's potential for academic and professional achievement. Specifically, please comment on the applicant's readiness to conduct scholarly research at an international site under this REU program. |
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| I rank this applicant in the top % of undergraduate students I have known.   |
| Please check one of the two statements below. (The U.S[FOREIGN SITE] REU program will honor your request to the extent permitted by law.)  |
| ☐ This report may be released to the applicant upon his/her request.   |
| Recommender's Signature  |
| Date   |
|  |